## STATE OF SOUTH DAKOTA

S.D. SEC. OF STATE

## Statement of Legal Newspaper Ownership and Circulation Return to: Secretary of State, 500 F. Capitol, Pierre, SD 57501-5077

Return to: Secretary of State, 500 I	E. Capitol, Pierre, SD 57501-5	5077
1. TITLE OF NEWSPAPER A	rha/	2. DATE 10 - 1-12
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLIS		NUAL SUBSCRIPTION
Weekly /82 52		\$ 2500/2750
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)		
(Not printers) P.C. Box H Centerville	Turner SD	57014
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTE	ERS OR GENERAL BUSINESS	OFFICES OF THE
Star Publishing Box H Cententille SD 57014		
6. FULL NAME OF PUBLISHER:		
shake +Ally Sch Hill		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the		
names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name		
and address, as well as that of each individual must be given.		
FULL NAME  COMPLETE MAILING ADDRESS		
Share + Allyson Hill Koo Washington St. Centerille 50 5700; 8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING I		
PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so		
state. If more space is needed, list on back of this form.	ION GROUD ON OTHER SEC	ortifico (il tiloto die tione, so
The state of the s		1
none	1	
	AVERAGE NO. COPIES	ACTUAL NO. COPIES
9. EXTENT AND NATURE OF CIRCULATION	EACH ISSUED PRECEDING 12	ISSUED
	MONTHS	NEAREST TO FILING DATE
A.TOTAL NO. COPIES (Net Press Run)	lass	600
B.PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors and	100	200
counter sales.	1 190	1 200
2. Mail Subscription	205	274
(Paid and or requested)	070	0//
C.TOTAL PAID AND/OR REQUESTED CIRCULATION	475	474
(Sum of 9B1 and 9B2)	110	1/7
D.FREE DISTRIBUTION	2.1	20
1. BY MAIL, CARRIER OR OTHER MEANS	$\perp$ $\partial I$	$\mathcal{A}^{\mathcal{O}}$
2. SAMPLES, COMPLIMENTARY AND OTHER FREE		3
COPIES	2	5
E.TOTAL DISTRIBUTION (Sum of C, D1 and D2)	498	497
F. COPIES NOT DISTRIBUTED	1	
1. Office use, left over, unaccounted, spoiled after printing	SQ	53
2. Return from News Agents	50	50
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run	(200	600
shown in A)  Statement must be signed by Publisher, Business Mana		
		ce of a Notary Public
I swear that the statements made by me are true, o	correct, and complete:	1 2
LILLIC MILLICHAN COLOR CALLICHAN		
- William - Mind I William		
Signature) (Tifle)		
Sworn to before me this 1 day of Ochber, 20 12		
State of South Dakota ) Sworn to before me this day of Chber , 20 day		
8	S S S	
County of Twee ) Notary Public /		
		11/14/201
(Seal)	My commission expires:	11/11/00